

EXXCEL

PROJECT MANAGEMENT

Vendor Prequalification Form

Building Repeatable Relationships Since 1989

Thank you for your interest on being on EXXCEL Project Management's pre-qualified bidders list. Once you are in our database we can include your company in Invitations to Bid our projects nationwide.

Please complete the information below and email the form to prequalify@exxcel.com



Company Name *

Contact First Name *

Contact Last Name *

Contact Email *

Mailing Address *

City *

State *

Zip Code *

Office Phone *

Mobile Phone

Your Best Contact for Estimating *

Please provide name, number, and email.

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Please provide name, number, and email.

Work Type *

Please check all divisions that apply. Note: when the bidding process begins, you will be contacted based on the information provided here, these need only be the divisions to which you will be capable of bidding and performing work on when/if awarded. If the scope of work your company provides is not covered in any of the aforementioned sections please check "other" box above and contact us.

Existing Conditions

Metals

Wood, Plastics, & Composites

Concrete

Thermal & Moisture Protection

Openings

Finishes

Specialties

Equipment

Facility Maintenance

Fire Suppression

Furnishings

Special Construction

Conveying Equipment

Electrical

Communications

Electronic Safety & Security

Earthwork

Exterior Improvements

Temporary Facilities &

Controls

Utilities

Design Consultants

Quality Requirements

HVAC

Transportation

Temporary Security

Spot Labor

Street/Pavement Cleaning

Masonry

Final Cleaning

Plumbing

Other

Description of Work Type *

Please briefly and specifically describe the work type you just selected.

Contractor License Number(s) *

Please provide your applicable license number(s) above. Note: This should include both trade and corresponding license number.

At this address, company operates as *

Name of Affiliate

If you answered "Affiliate of" above please provide the affiliate name, headquarters locations, and any other identifiable informational about your parent company.

Federal Tax ID *

Please submit a copy of your company's W-9.

Do you have current Workers' Compensation Insurance *

Yes No

Do you have current Liability Insurance *

Yes No

Dunn & Bradstreet Info (#/rating)

Name and Address of Principal Bank *

Union Affiliation *

Ever Experienced *

Has the company, or it's predecessors, or a person of official capacity been adjudicated bankrupt, or failed to complete a contract, or made assignment of assets in settlement for less than total amount of indebtedness? If yes to any/all, please explain. If no, please write "no/not applicable."

Liens, suits, or pending judgments *

Experience Modification Rating (EMR) *

Principal Experience *

Indicate the principal individuals of your present organization and give a brief summary of their construction experience.

Total # of Employees *

Total # of Field Employees *

Total # of Office Employees *

Minority Ownership or Backing *

Yes No

If yes, % of Ownership

How many years under current business name *

Method of Completing Work *

If % subcontracted, how much/items

Current Project Information

List names of all projects, contract amounts and percent complete for all projects your organization has currently in progress. Please list the names, contract amount(s) and estimated date(s) of completion.

Current Project Information

Please list the names of three (3) significant representative projects, including contract amount(s) and date(s) of completion, your organization has completed in the past two (2) years.

General Contractor References

Please provide at least two (2) general contractor references including firm, contact/ title, phone number, email.

Trade Account Reference

Name/title, phone number, email.

Safety Checklist *

Company has written a safety plan

Company has written haz-com plan

Employees have been "task trained"

I will forward the above documents to prequalify@exxcel.com
It is a contractual requirement to provide a copy of your companies written safety program and/or safety training certificates for your employees. Please indicate if you are able to provide copies of the above. If so, after submitting this form, please forward this information to prequalify@exxcel.com for processing.

Has your company been cited/fined by OSHA * Yes No (within the last 5 years)

Explanation

If yes to the OSHA questions above, please explain (amount, violation).

Additional Information

Please provide any additional information above.

Electronic Signature (name, title) *

This prequalification statement is submitted by the applicant with the full knowledge that the contents herein are to be considered as a true and accurate representation of the capabilities and financial status and capacity of the company to perform work on EXXCEL Project Management, LLC's projects.